PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09820546

		CLAIMS A	S FILED	- PART	l		SMALL E	NTITY		OTUED	TUAN
T	OTAL CLAIMS		(Columi	n 1)	(Colu	(Column 2)		TYPE		OTHER SMALL	
TOTAL CLAIMS			13	13			RATE	FEE	4,71***	RATE	FEE
FOR			NUMBEF	NUMBER FILED		BER EXTRA	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			13 minus 20=		• -		X\$ 9=		OR	X\$18=	
_	DEPENDENT C		minus 3 =		· _	*		 	OR	X80=	
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT	RESENT			+135=	 	1		
* If	the difference	e in column 1 is	less than z	zero, enter	r "0" in ‹	column 2	TOTAL		OR	+270=	7/0
	C	CLAIMS AS /	AMENDE	MENDED - PART II			IUIAL		OR	TOTAL OTHER	7/0
		(Column 1)		(Column :		(Column 3)	SMALL	ENTITY	OR	SMALL E	
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N	Total		Minus	**		=	X\$ 9=		OR	X\$18=	
AME	Independent	ENTATION OF M	Minus	***	- 61 4184	=	X40=	-	OR	X80=	
	TINOTTHEOL	ENTATION OF IM	JLIIPLE DE	PENDENT	CLAIM	1	+135=	- 3550	1 ***	+270=	
						ζ.	TOTAL			TOTAL	- :-
		(Column 1)		(Colum	nn 2)	(Column 3)	ADDIT. FEE		O ,	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIĞHI NUME PREVIO PAID F	EST BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$ 9=		OR	X\$18=	<u> </u>
AME	Independent	•	Minus	***		=	X40=		ত (ক্ ৰ জ্ব	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR		
							+135=		OR	+270=	
							TOTAL ADDIT. FEE		OR A	TOTAL ADDIT. FEE	
21		(Column 1) CLAIMS		(Colum		(Column 3)			_		
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$ 9=		OR	X\$18=	1 1-1-
	Independent	*	Minus	***		=	X40=		F	X80=	
Ì	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		OR	VOO	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							+135=		OR	+270=	
***	t the "Highest Nui If the "Highest Nui	mber Previously Pa Imber Previously Pa Inber Previously Paid	aid For" IN THIS aid For" IN THIS	IS SPACE is IS SPACE is	less than	1 20, enter "20."	ADDIT. FEE			TOTAL DDIT. FEE	
		ibor i romousiy r aic	11 Of (Total Of	muepenuel	my is me	nignest number to	ound in the appr	opriate box	in colu	mn 1.	